

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO.	FILED DATE				
						APPLICANT(S)					
						CLAIMS					
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		IND	IND	IND	IND	IND	IND
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND
1						51	1				
2						52					
3						53	1				
4						54	1				
5						55	1				
6						56					
7						57					
8						58					
9						59					
10						60					
11						61					
12						62					
13						63					
14						64					
15						65					
16						66					
17						67					
18						68					
19	1					69					
20	1					70					
21	1					71					
22	1					72					
23	1					73					
24	1					74					
25	1					75					
26	1					76					
27	1					77					
28	1					78					
29	1					79					
30	1					80					
31	1					81					
32	1					82					
33	1					83					
34	1					84					
35						85					
36	1					86					
37	1					87					
38	1					88					
39	1					89					
40	1					90					
41						91					
42						92					
43	1					93					
44						94					
45						95					
46						96					
47						97					
48						98					
49						99					
50						100					
TOTAL IND.						TOTAL IND.					
TOTAL DEP.						TOTAL DEP.					
TOTAL CLAMES						TOTAL CLAMES					

39  
16